# COUNTY OF SAN LUIS OBISPO BOARD OF SUPERVISORS AGENDA ITEM TRANSMITTAL

(1) DEPARTMENT Behavioral Health	(2) MEETING DATE 12/17/2013	Cindy Collins	NTACT/PHONE Collins, Administrative Services Manager 788-2932 Lopez, Accountant 781-4783				
Services for FY 2013-14 of services related to the Me	renewal Standard Agreement Perfo delegating to the County responsibi ental Health Services Act, Projects a Services Grant, and 2) grant deleg	lity for establis for Assistance	hing county-wide co in Transition from H	ommunity mental health lomelessness, and			
approve a rene     Services for FY 20     health services re     Homelessness, and	TION e Board approve and direct the Charwal Standard Agreement Performa 013-14 delegating to the County re elated to the Mental Health Services and Community Mental Health Services on of authority to the Health Agency	ance Contract versponsibility for a Act, Projects ces Grant, and	establishing county for Assistance in Tra	-wide community mental			
(6) FUNDING SOURCE(S) N/A	(7) CURRENT YEAR FINANCIAL IMPACT \$0.00	(8) ANNUAL FINANCIAL IMPACT \$0.00		(9) BUDGETED? Yes			
(10) AGENDA PLACEMENT (12) AGENDA PLACEMENT (13) Present (13) Present (13) Present (14) Present (15) Present		ne Est) {	} Board Business (	Time Est)			
(11) EXECUTED DOCUM { } Resolutions { x }	ENTS Contracts { } Ordinances { } !	N/A					
(12) OUTLINE AGREEMENT REQUISITION NUMBER (OAR) N/A			(13) BUDGET ADJUSTMENT REQUIRED?  BAR ID Number: N/A  { } 4/5 Vote Required { x } N/A				
(* ', = ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	ON MAP (15) BUSINESS IMPACT STATEMENT? No		(16) AGENDA ITEM HISTORY  { } N/A Date: 4/28/09				
(17) ADMINISTRATIVE (	OFFICE REVIEW	•					
(18) SUPERVISOR DIST	RICT(S)						

# County of San Luis Obispo

TO: Board of Supervisors

FROM: Jeff Hamm, Health Agency Director

DATE: 12/17/2013

SUBJECT: Request to: 1) approve a renewal Standard Agreement Performance Contract with the State Department

of Health Care Services for FY 2013-14 delegating to the County responsibility for establishing county-wide community mental health services related to the Mental Health Services Act, Projects for Assistance in Transition from Homelessness, and Community Mental Health Services Grant, and 2) grant delegation

of authority to the Health Agency Director to sign the agreement. All Districts.



It is recommended that the Board approve and direct the Chairperson to:

1) approve a renewal Standard Agreement Performance Contract with the State Department of Health Care Services for FY 2013-14 delegating to the County responsibility for establishing county-wide community mental health services related to the Mental Health Services Act, Projects for Assistance in Transition from Homelessness, and Community Mental Health Services Grant, and

2) grant delegation of authority to the Health Agency Director to sign the agreement.

#### **DISCUSSION**

The Department of Health Care Services (DHCS) is responsible for implementing the provisions of the Mental Health Services Act (MHSA), Projects for Assistance in Transition from Homelessness (PATH) and the Community Mental Health Services Grant (MHGB) through annual county mental health services performance contracts with all counties. The standardized sections of this agreement were negotiated between the DHCS and the California Mental Health Director's Association. Due to the negotiation process, DHCS submitted the FY 2013-14 agreement to counties during the last week of September. DHCS has set the term of this agreement to run from July 1, 2013 through June 30, 2014.

The previous agreement between the County and the state (previously the Department of Mental Health, and now the Department of Health Care Services) for MHSA ended on June 30, 2013 and did not include PATH and MHBG. This renewal agreement now includes all three programs and delegates to the County responsibility for establishing county-wide community mental health services for each. The County must meet certain conditions and requirements to receive funding for these programs.

#### Mental Health Services Act (MHSA)

The MHSA was enacted into law January 1, 2005, following the passage of Proposition 63 in November 2004. This Act was designed to expand and transform county mental health services by imposing an additional one percent tax on individual taxable income in excess of one million dollars. Annually, the Department presents the MHSA Annual Update report for Board approval which details the various MHSA programs, number of clients served, and cost associated with each program. The Annual Update can be found here:

http://www.slocounty.ca.gov/Assets/MHS/pdfs/MHSA+Annual+Update+2013-2014.pdf

## Projects for Assistance in Transition from Homelessness (PATH)

The State was awarded federal homeless funds through the federal McKinney PATH formula grant, which the County receives annually. The grant funds are to be used for community based outreach, mental health and substance abuse



referral/treatment, case management and other support services for the homeless mentally ill. This program works alongside the MHSA Full Service Partnership Homeless Services program and funds half of a full-time Mental Health Therapist. The Mental Health Therapist (MHT) will outreach to homeless mentally ill people and assist them in accepting and participating in existing programs, as well as linking and consulting with other homeless service providers. For example, if a homeless mentally ill individual accepts assistance from the MHT, then he/she could be referred to the Homeless Full Service Partnership program, if the individual meets the criteria for enrollment. Individuals may also be linked with dual-diagnosis services, family supports, and substance abuse counseling. The overall goal of the PATH grant is to assist individuals in accessing mental health services and housing. MHSA covers the match required for the grant.

#### **Community Mental Health Services Block Grant (MHBG)**

The Department of Health Care Services (DHCS) awards federal MHBG funds to counties to provide a broad array of mental health services within their mental health system of care to the following target populations: children and youth with serious emotional disturbances, and adults and older adults with serious mental illnesses. The County may use the funds to develop innovative programs or augment existing programs. The County uses the funds to augment the following programs and services:

North County Clubhouse (contracted through American Care Home): This program enriches a large board and care home with living skills training and recreational activities usually found only in intensive residential treatment or off-site day treatment milieus.

<u>Behavioral Health Treatment Court (BHTC):</u> The funds are used to pay for a portion of a full-time equivalent staff member to provide outpatient case management, rehabilitation services, case planning and consultations, group rehabilitations, medication support, referrals and crisis intervention for clients in the BHTC program.

<u>Enhancement of services for Dual Disorder clients:</u> The funds are used to pay for a portion of a full-time equivalent staff member who is a dual disorder-trained clinician to add to the capacity of the Dual Disorder Program. The program is an integrated service with access to all Mental Health services and provides treatment for both disorders by specially trained staff.

<u>Children's System of Care:</u> The purpose of the overall System of Care for children and adolescents is to target seriously emotionally disturbed children, help them to improve their functioning in community based, less restrictive settings and, whenever possible, in their own homes and schools. To achieve this overall goal, the Department collaborates with numerous agencies, such as Education, Probation, and Social Services to identify, intervene and collaborate through interagency processes, including continuation of the Children's Services Network, multi-agency case management teams, and the Integrated Services Committee. The funds are used towards the continuation and maintenance of services to non-Medi-Cal eligible children at the South County Services Affirming Family Empowerment (SAFE) System of Care.

# OTHER AGENCY INVOLVEMENT/IMPACT

County Counsel has reviewed and approved the agreement as to form and legal effect.

## FINANCIAL CONSIDERATIONS

While there is no funding amount associated with this agreement, the performance contract is meant to ensure the County is adhering to the conditions and requirements of the MHSA, PATH and MHBG. If the County does not adhere to the contract, then DHCS can withhold payments until the County is in compliance.

Pursuant the agreements previously executed administratively, the budgeted amounts for each program is detailed below:

MHBG							
	FY 2012-13		F	Y 2013-14			
Programs Funded	Actual			Budget			
American Care Home (contract)	\$	97,382	\$	97,382			
Behavioral Health Treatment Court		54,786		39,004			
Dual Disorder Program		57,159		57,159			
Children's System of Care	254,061			254,601			
Total CMHB Funded Budget*	\$	463,388	\$	448,146			
PATH							
	F	FY 2012-13		Y 2013-14			
Program Funded	Actual			Budget			
Homeless Full Service Partnership	\$	50,044	\$	46,280			
Total PATH Funded Budget*	\$	50,044	\$	46,280			
MHSA							
	FY 2012-13		F	Y 2013-14			
Programs Funded	Actual		Actual				
Community Services & Supports	\$	5,218,488	\$	6,396,246			
Prevention & Early Intervention		1,708,596		2,015,091			
Innovation		767,529		876,218			
Workforce, Education & Training		78,746		255,446			
Capital Facilities		943,064		1,139,236			
Total MHSA Funded Budget*		8,716,423	\$	10,682,237			

<sup>\*</sup>Total budget reflects only the funding's share of expenses.

# Results

**Community Mental Health Services Block Grant** 

Community Mental Health Services Block Grant							
North County Clubhouse							
	FY	FY 2012-13 FY 2012-1		2012-13	FY	2013-14	
Year	Target		Actual		Budgete		
Cost	\$	97,382	\$	97,382	\$	97,382	
Number of clients served		50		50		50	
Percentage of clients served will not use acute							
hospitalization during the fiscal year		75%		96%		75%	
Behavioral Health Treatment Court							
	FY	2012-13	3 FY 2012-13		FY	2013-14	
Year	Target		Actual		Budgeted		
Cost	\$	54,786	\$	54,786	\$	39,004	
Number of clients served		28		28		28	
Percentage of enrolled clients will remain in the							
program during the fiscal year		65%		69%		80%	
Dual Disorder Program							
	FY 2012-13		FY 2012-13		FY	2013-14	
Year		Target		Actual		Budgeted	
Cost	\$	57,159	\$	57,159	\$	57,159	
Number of clients served		30		38		30	

Children's System of Care							
	FY 2012-13		FY 2012-13		FY 2013-14		
Year	Target		Actual		Budgeted		
Cost	\$	254,061	\$	254,061	\$ 254,061		
Number of clients enrolled		45		35	45		

#### **PATH**

PATH							
	FY 2012-13		FY 2012-13		FY 2013-14		
Year	-	Target		Actual		Budgeted	
Cost	\$	50,044	\$	50,044	\$	46,280	
Number of clients to be contacted		100		95		100	
Number of clients to be enrolled		50		10		50	

FY 2012-13 enrollment numbers were low due to vacancies and associated staffing changes.

#### Enrollment into PATH occurs when:

- 1) an individual has been determined to be PATH eligible,
- 2) the individual and Mental Health Therapist (MHT) have mutually agreed that services will be provided, and
- 3) a file or record has been created for the individual with the above information documented as well as documentation of services provided.

Some of the individuals contacted by the MHT may already have an open case or are receiving services, may be transient, or may deny services. The number of clients contacted and enrolled is part of the data requirements of the grant and only reflects the numbers associated with PATH.

MHSA – Please see FY 2013-14 Annual Update for outcomes: http://www.slocounty.ca.gov/Assets/MHS/pdfs/MHSA+Annual+Update+2013-2014.pdf

Approval of the new agreement will continue our participation in the MHSA, PATH and MHBG programs. Through each of these programs, the Health Agency's Behavioral Health Department furthers its departmental goals to assist individuals with serious mental illness to be as functional and productive as possible in the least restrictive and least costly environments. Providing the most appropriate services to the clients increases the probability of positive treatment outcomes. Furthermore, positive treatment outcomes contribute to the wider County vision of a healthy and safe community.

# **ATTACHMENTS**

1. Attachment 1 - Department of Health Care Services Agreement